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Individual: Corporation orpother private group entity Government Please check the appropriate assignee category or categories (will not be printed on the patent): 02 FC:8001 03 FC:1504 300.00 DA 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). Advance Order - # of Copies _ 5. Change in Entity Status (from status indicated above) b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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OIPE					
APR 1 1 2005 8	TRANSMIT (General - P	Docket No. SAR 14470A			
In A MARIEMENT (Of: Russ, Cornelius	Christian et. al.			
Application No. 10/822,912	Filing Date 04/12/04	Examiner Jackson, Stephen W.	Customer No. 28166	Group Art Unit 2836	Confirmation No.
		GE (ESD) PROTECTION DEVI G FOR MULTI-FINGER TURN		ULTANEOUS A	ND
		COMMISSIONER FOR PAT	ENTS:		
Issue Fee Transmittal Publican					
in the above ident	ified application.				

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Daniel S. Goldberg, Esq. **Attorney for Applicants** Registration No. 39,689

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ng for F			\L [iling Date	04/12/0)4	
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1000 p		-	10-	Examiner Name	Jackso	n, Stephen W.	
Applicant claims small e	entity status.	See 37 CFR	1.27	Art Unit	2836		
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FEE CALCULATION							
1. BASIC FILING, SEARC	•			J EEE0	FVALUE	ATION EFFO	
	FILING F	EES Small Entity	SEARCI	H FEES Small Entity	EXAMIN.	ATION FEES Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid(\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							Small Entit
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (includ	ling Reissue	s)				50	25
Each independent claim ov	er 3 (includ	ing Reissues)				200	100
Multiple dependent claims						360	180
							Dependent Claims
Total Claims	Extra Claims			Fee Paid (\$)		<u>Fee (\$)</u>	Fee Paid (\$)
- 20 or HP =			<u>50.00</u> =	\$0.00			
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HP = highest number of indepe	ndent claims p						
3. APPLICATION SIZE FE	E						
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4. OTHER FEE(S)							Fee Paid (\$
Non-English specification,		no small entity					
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Other (e.g. late filing surchassissing Submitted BY		/					
	and	j. Soldl	y Re	gistration No.	39,689	Telephone	609-734-2799
SUBMITTED BY	and.	J. Golde	A Re	omey/Agent)	39,689	Telephone Date	609-734-2799 <i>U-7-05</i>

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